



Lose the Training Wheels Volunteer Application Form
Spring Break, April 6-10, 2009
@ Lee District RECenter
6601 Telegraph Road, Franconia, VA

Thank you for your interest in volunteering for the Lose the Training Wheels program presented by the Fairfax County Park Authority. We are pleased to offer this program and would like to thank you in advance for your support in making this program a success.

Volunteer Instructions:

1. Read the "Volunteer Flyer" to determine if this volunteer experience meets your needs.
2. Any questions: call Jean Skinner 703-324-8565, Gary Logue 703-324-8727, or email emily.house@fairfaxcounty.gov
3. Complete and return form to emily.house@fairfaxcounty.gov or fax to:
Fairfax County Park Authority
Attn: Gary Logue 703-324-3976

Personal Information

Name of Volunteer:	T-shirt Size:
Age of Volunteer:	
Parent/Guardian name (if under 18):	
Home Phone:	Street:
Cell Phone:	City:
Office Phone:	State:
E-mail Address:	Zip Code:
Preferred Contact Method:	

Emergency Contact Information

In the event of an emergency, who would you like contacted?

Name:	Phone Number:
Relationship:	Alternative Phone Number:

Volunteer Role

Please indicate which volunteer role you are interested in:

- ☐ Administrative Assistant: This individual will assist in the check-in process and other administrative duties during the camp.
- ☐ Spotter: This individual will run alongside a child as they are learning to ride a bike. They will provide physical support and encouragement.

Please determine your highest level of fitness:

- ☐ I can run fast for one hour with short breaks
- ☐ I can run steadily but not fast for one hour with short breaks
- ☐ I can walk fast for one hour with short breaks
- ☐ I can walk steadily for one hour with short breaks
- ☐ I cannot walk at a steady pace for one hour with short breaks

Your Commitment

Please indicate the times in which you will be available to volunteer. Please note that we ask that you commit to working the entire week of the camp. Campers bond to their volunteers and rely on the same person to be there each day to help them learn to ride.

Camps & sessions (select one camp and one session or multiple camps and sessions)

☐ **April 6-10, 2009 at Lee RECenter**

☐ 8:15 am – 9:45 am

☐ 9:45 am – 11:15 am

☐ 12:00 pm – 1:30 pm

☐ 1:30 pm – 3:00 pm

☐ 3:00 pm – 4:30 pm

Volunteer Benefits

Don't forget your volunteer benefits! Please let us know if you will be able to have lunch with us during the camp session. Lunch will be served between 11:15 and 12:15.

☐ Yes, I would like to have lunch at camp each day. Please order a meal for me.
☐ I am a vegetarian.

As a volunteer, you will receive free passes for usage of FCPA RECenter facilities.

Optional Information

What is your profession?

Do you have experience working with children?

Do you have experience working with children with disabilities?

If yes, please describe:



If ADA accommodations and/or alternative formats are needed, please call (703) 324-8563, at least 10 working days in advance of the registration deadline or event. TTY (703) 803-3354